

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Ryan for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. William H. Davis**

Mailing Address 21 Winding Way

City Verona	State PA	Zip Code 15147-3888
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FEC ID number of contributing federal political committee. **C**

Name of Employer Retired	Occupation Retired
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Receipt For: 2014  
☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date **100**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		08		2014

Transaction ID : A-CF156459

Amount of Each Receipt this Period

100
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**B.** Full Name (Last, First, Middle Initial)  
**P. F. N. Fanning**

Mailing Address PO Box 607

City Unionville	State PA	Zip Code 19375-0607
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FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
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Receipt For: 2014  
☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date **200**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		13		2014

Transaction ID : A-CF161067

Amount of Each Receipt this Period

100
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**C.** Full Name (Last, First, Middle Initial)  
**Mr. Gerald D. Cimino**

Mailing Address PO Box 85

City Colorado Springs	State CO	Zip Code 80901-0085
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FEC ID number of contributing federal political committee. **C**

Name of Employer Phil Long Dealerships	Occupation CEO
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Receipt For: 2014  
☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date **500**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		16		2014

Transaction ID : A-CF161187

Amount of Each Receipt this Period

250
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**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

450.00
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